# North Dakota Behavioral Health Vision 20/20: Strategic Plan Protocol

Human Services Research Institute, November 16, 2018

### Introduction and Background

In the final report of the 2018 *North Dakota Behavioral Health System Study*, the Human Services Research Institute (HSRI) detailed a set of recommendations to guide system improvement activities for the state in the coming years. The recommendations were based on HSRI's quantitative and qualitative analysis, national principles for a good and modern behavioral health system, and the community's vision for systems change.

Invest in prevention and early intervention

Ensure timely access to behavioral health services

Expand outpatient and community-based services

Enhance and streamline system of care for children and youth

Continue criminal justice strategy

Recruit and retain a competent workforce

Expand telebehavioral health

Ensure values of person-centeredness, cultural competence, and trauma-responsiveness

Encourage and support community involvement

Partner with tribal nations to increase health equity

Diversify and enhance funding

In addition to the above, HSRI made recommendations related to ensuring the state has adequate infrastructure to implement and sustain data-driven system change. These recommendations involved creating and executing an implementation plan and conducting an ongoing, system-wide monitoring of need and access to behavioral health services. This *Strategic Plan Protocol* provides a roadmap for these **coordinated, data-driven system improvement activities** through the implementation of the recommendations from the *Behavioral Health System Study*. The goal of this work is to set the course for the North Dakota community to engage in **ongoing system monitoring, planning, and improvements** in the long-term.

#### Phases of Work

The work involves four phases: *Strategic Planning, Prioritization and Refinement, Initiation, and Monitoring and Sustaining*.

**Phase 1. Strategic Planning** — The basis for the work will be recommendations offered in the 2018 North Dakota Behavioral Health System Study Final Report. To begin this phase, HSRI visited Bismarck in October 2018 to meet with stakeholder groups to finalize the purpose, scope, and role of this effort. During the visit, it was determined that the Behavioral Health Planning Council would be a central entity that drives system improvement activities, with support from HSRI. The work of this visit forms the basis of this Strategic Plan Protocol and the accompanying Goals Matrix, both living documents that will inform North Dakota's behavioral health system change efforts.

Phase 1 Products: Draft strategic goals, strategic plan protocol, communications plan

**Phase 2. Prioritization and Refinement** – HSRI's report has a range of recommendations that vary in degree of priority and ease of implementation. This phase involves establishing a priority order for acting upon recommendations, and then refining specific goals and objectives for each recommendation using the SMART framework. SMART is a system for rating goals to ensure they are Specific, Measurable, Attainable, Realistic, and Time-Bound. The goals and objectives will involve specifying individual tasks, creating timelines, determining responsibilities, identifying indicators of progress/success, and establishing benchmarks using those indicators.

Phase 2 Product: Initial strategic plan (prioritized goals and objectives)

**Phase 3. Initiation** – This phase consists of initiating action on goals and objectives in order of priority, developing metrics to monitor progress, troubleshooting issues as they arise to prevent disruption in progress, and revising and amending protocols and goals as indicated.

Phase 3 Product: March 2019 progress report

**Phase 4. Monitoring and Sustaining** – Strategic planning in a complex system requires ongoing monitoring, and HSRI anticipates that after several months of implementing the plan, it will be important to revisit the protocol to ensure that it remains feasible and effective in producing meaningful and sustained change. Treating the goals and objectives as a static plan will fail to account for inevitable shifts in local, state, and federal contexts. Rather than relying on fixed goals and objectives, we will use continuous learning principles, which involve regularly revisiting and reflecting upon the group's direction and adjusting as needed. As efforts continue, contexts change, and new goals and priorities arise, the strategic plan should be treated as a living document that supports changes in course, the introduction of new goals and objectives, and discontinuation of goals and objectives that are no longer relevant. As goals are completed, it may be necessary to monitor progress in an ongoing way to ensure that changes are sustained over the long term.

Phase 4 Products: June 2019 progress report, Revised strategic plan

The current strategic planning process is designed to take place from October 2018 to June 2019. At the close of that process, this *Strategic Plan Protocol* will be revised for use as a tool to to support a process for data-driven oversight and ongoing systems change

- 1. Strategic Planning (Oct-Nov 2018)
- •Finalize purpose, scope, and roles
- Operationalize goals (goal matrix)
- Develop strategic plan protocol
- 4. Monitoring & Sustaining (Apr-Jun 2019)
- Monitor ongoing progress
- •Troubleshoot issues
- •Initiate additional goals as needed
- 2. Prioritization & Refinement (Dec 2018)
- Specify objectives, action steps, and indicators of progress
- •Establish priority and timeline
- Determine responsibilities
- 3. Initiation (Jan-Mar 2019)
- Gather baseline data on each goal and objective
- •Work with stakeholders to initiate action

### **Roles and Work Groups**

The Behavioral Health Planning Council is at the center of behavioral health system change activities in North Dakota. HSRI support tasks will include working with the Behavioral Health Planning Council to convene work groups, produce meeting materials, develop ad hoc reports, memos and white papers on key topics, participate in meetings, document action items from meetings, and other support as needed. The Consensus Council, In., which facilitates the work of the Behavioral Health Planning Council, will be kept in the loop on all planning communications and activities. The Department of Human Services Behavioral Health Division (BHD) will oversee HSRI's work and support the systems change efforts by providing information throughout the strategic planning process and coordination for meetings and site visits.

HSRI is also working with the Behavioral Health Planning Council and other stakeholders to identify and coordinate other local, state, and tribal work groups around North Dakota that are undertaking initiatives relevant to behavioral health. Through the process, these workgroups may be engaged to support implementation of goals, monitor progress, and otherwise support systems change efforts. When stakeholders agree there is a pressing need for a additional work groups to pursue specific goals, HSRI will work with the Behavioral Health Planning Council and relevant stakeholders to convene those new groups.

## **Group Coordination and Communication Processes**

HSRI will join each Behavioral Health Planning council meeting during the project period, from October 2018 to June 2019. HSRI will also meet twice per month with the Executive Committee of the Behavioral Health Planning Council. Additional meetings will be scheduled on an as-needed basis throughout the life of the project.

On an as-needed basis, HSRI will remain in communication with other contacts established during the *Behavioral Health System Study* at entities – including social service agencies, other state agencies and departments, tribal nations, and community organizations – to support implementation of and gather information about progress toward the strategic goals.

#### Strategy for Alignment with Existing Initiatives

Many important initiatives related to behavioral health system improvements and enhancements are already underway in North Dakota. These include DHS initiatives, local community efforts, provider-driven initiatives, and advocacy. To the extent possible, the behavioral health system change initiative will be aligned with existing initiatives. During the strategic planning process, HSRI will work with the Behavioral Health Planning Council, the BHD, and other agencies to compile an inventory of these initiatives and to review the strategic goals with these initiatives in mind. The idea is that the strategic goals will reflect important work already underway and document gains made by the various initiatives. It is also important the strategic goals do not duplicate and/or work at cross-purposes with other behavioral health-related initiatives.

#### Ensuring Meaningful Stakeholder Engagement

Ensuring meaningful stakeholder engagement is essential to this behavioral health systems change effort. Stakeholders – including service users and their families, advocates, providers, administrators, and other members of the public – will be engaged at each phase of the effort. HSRI will use a *Communications Plan* to ensure activities are communicated to public stakeholders and that a process is in place to continuously receive stakeholder feedback. During the Strategic Planning phase, HSRI will create a survey inviting all public stakeholders to review and indicate priority of each of the strategic goals.